



PATENT  
450100-03281

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Yasuhiro Toguri  
Serial No. : 09/879,353  
Filed : June 12, 2001  
For : APPARATUS, METHOD, AND SYSTEM FOR INFORMATION  
PROCESSING, AND RECORDING MEDIUM  
Examiner : Nathan A. Sloan  
Art Unit : 2614

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NOV 19 2004

Technology Center 2600

745 Fifth Avenue  
New York, NY 10151  
Tel: 212-588-0800

**Mail Stop Amendment**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.  
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

**Claims as Amended**

| (1)                                     | (2)<br>Claims remaining after<br>amendment | (3)   | (4)<br>Highest<br>number<br>previously<br>paid for | (5)<br>Present extra | (6)<br>Rate | (7)<br>Additional<br>Fee |
|---|--|-------|--|----------------------|-------------|--------------------------|
| Total claims                            | 25   | Minus | 25   | 0 x                  | \$18 (9)    | = \$0.00                 |
| Independent claims                      | 6  | Minus | 6  | 0 x                  | \$88 (44)   | = \$0.00                 |
| Total additional fee for this amendment |  |       |  |                      |             | \$0.00                   |

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: **Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**, on November 10, 2004  
Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

Signature

November 10, 2004

Date of Signature

Respectfully submitted,

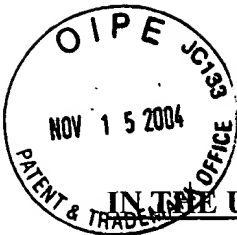
FROMMER LAWRENCE & HAUG LLP  
Attorneys for Applicants

By:

Bruno Polito

Reg. No. 38,580

Tel: 212-588-0800



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PATENT  
450100-03281 41

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Name of Applicant, Assignee or Registered Representative

Signature

November 10, 2004

Date of Signature

AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed August 10, 2004, please amend the above-identified application as follows.